

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

CityPAC

ADDRESS (number and street)

P.O. Box 754

☐Check if different  
than previously  
reported. (ACC)

Chicago

IL

60690

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIPCODE

C00187526

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2009

through

12

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

David Epstein

Signature of Treasurer

Electronically Filed by David Epstein

Date

01

29

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 25

Write or Type Committee Name  
CityPAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	104194.45
(b) Cash on Hand at Beginning of Reporting Period .....	90372.90	
(c) Total Receipts (from Line 19) .....	34983.79	35831.41
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	125356.69	140025.86
7. Total Disbursements (from Line 31) .....	28679.83	43349.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	96676.86	96676.86
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 25

Write or Type Committee Name  
CityPAC

Report Covering the Period:

From:

M M D D Y Y W Y  
0 7 0 1 2 0 0 9

To:

M M D D Y Y W Y  
1 2 3 1 2 0 0 9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	31700.00	31736.00
(ii) Unitemized .....	3258.00	3222.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	34958.00	34958.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	34958.00	34958.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	505.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	25.79	368.41
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	34983.79	35831.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	34983.79	35831.41

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	5664.83	7334.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	5664.83	7334.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	27000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	9015.00	9015.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28679.83	43349.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28679.83	43349.00	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	34958.00	34958.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	34958.00	34958.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5664.83	7334.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	505.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5664.83	6829.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL BAUER

Mailing Address 2500 N Lakeview Ave

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation  
LOBBYING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.10645275

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

SANFORD CANTOR

Mailing Address 976 Oak Dr

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.10645278

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

SCOTT COHEN

Mailing Address 566 West Lake St

City

Chicago

State

IL

Zip Code

60661

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
CANDIDATE FOR LT. GOVERNOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

72.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.10645270

Amount of Each Receipt this Period

-36.00

**SUBTOTAL** of Receipts This Page (optional) .....

464.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)  
LESTER CROWN

Mailing Address 1155 Mohawk Rd

City State Zip Code  
Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Henry Crown and Company

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.10645272

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
MAURY FERTIG

Mailing Address 421 Bierhill Rd

City State Zip Code  
Deerfield IL 60015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RELATIVE VALUE PARTNERS,  
LLC

Occupation  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.10613796

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
CHARLES L GLICK

Mailing Address 639 W Fullerton Pkwy

City State Zip Code  
Chicago IL 60614

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Winston & Strawn

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.10613765

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

5750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)  
STEVE HEFTER

Mailing Address 2386 Tennyson Ln

City State Zip Code  
Highland Park IL 60035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Director

Occupation  
Wachovia Securities

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.10613770

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
ANDREW S HOCHBERG

Mailing Address 77 S Deere Park Dr

City State Zip Code  
Highland Park IL 60035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NEXT REALTY, LLC

Occupation  
MANAGING PRINCIPAL & MANAGING BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.10614082

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
LARRY HOCHBERG

Mailing Address 275 N Deere Park Dr E

City State Zip Code  
Highland Park IL 60035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
UNKNOWN

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10645271

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)

NANCY KOHN

Mailing Address 545 W Aldine Apt 6a

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.10614470

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

LARRY KUGLER

Mailing Address 234 Maple Hill Rd

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MILLARD METAL MAINTENANCE  
CO.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.10645279

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

ANDREW LAPPIN

Mailing Address 630 Lincoln Ave

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SHETLAND PROPERTIES

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.10610596

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)

JENNIFER LEVINE

Mailing Address 3750 N Lake Shore Dr

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pritzker Family Foundation

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.10645274

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

RUSS PASS

Mailing Address 2506 Saint Johns Ave

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bridge Strategy Group

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.10645277

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

SANFORD E PERL

Mailing Address 570 Longwood Ave

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KIRKLAND & ELLIS

Occupation  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.10622639

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)

JB PRITZKER

Mailing Address 1603 Orrington Ave

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW WORLD VENTURES, INC.

Occupation

VENTURE CAPITALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	0	/	2	0	0	9

Transaction ID: SA11AI.10614081

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

MOLLY RABINOVITZ

Mailing Address 3930 N. Pine Grove #814

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WEISSCOMM PARTNERS

Occupation

COMMUNICATIONS CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	0	9

Transaction ID: SA11AI.10613769

Amount of Each Receipt this Period

236.00

**C.**

Full Name (Last, First, Middle Initial)

STEVEN RITCHIE

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KIRKLAND AND ELLIS

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	9

Transaction ID: SA11AI.10622554

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

5736.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)

SKIP SCHRAYER

Mailing Address 1535 Knollwood Ln

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASSOCIATED AGENCIES

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	3	/	2	0	0	9

Transaction ID: SA11AI.10610672

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

JERRY SENSER

Mailing Address 55 South Deere Park Dr

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INSTITUTIONAL CAPITAL

Occupation

SECURITIES ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	1	/	2	0	0	9

Transaction ID: SA11AI.10613759

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID A SHERMAN

Mailing Address 777 Greenleaf Ave

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BARRY E. SHERMAN & SONS

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	1	/	2	0	0	9

Transaction ID: SA11AI.10613767

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

6000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)

BILL SILVERSTEIN

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10610677

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

ALAN SKIDELSKY

Mailing Address 3629 N Wilson Ave

City

State

Zip Code

Chicago

IL

60613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sarnoff and Baceast

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.10613766

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

D TIFFANY TAMPLIN

Mailing Address 421 W Huron St, #804

City

State

Zip Code

Chicago

IL

60654

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DIGITAS

Occupation

MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.10614385

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)

JEFFREY WELLEK

Mailing Address 1414 Sheridan Rd

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Focus Products Group, LLC

Occupation

Business Exec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 0 9

Transaction ID: SA11Al.10610573

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

31700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 25

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)

Smith Barney

Mailing Address 227 W Monroe

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

348.03

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 9

Transaction ID: SA17.10647382

Amount of Each Receipt this Period

5.41

Interest Earned

**B.**

Full Name (Last, First, Middle Initial)

Smith Barney

Mailing Address 227 W Monroe

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

348.83

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA17.10647383

Amount of Each Receipt this Period

0.80

Interest Earned

**C.**

Full Name (Last, First, Middle Initial)

Smith Barney

Mailing Address 227 W Monroe

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.45

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: SA17.10647384

Amount of Each Receipt this Period

1.62

Interest Earned

**SUBTOTAL** of Receipts This Page (optional) .....

7.83

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 25

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

CityPAC

**A.**

Full Name (Last, First, Middle Initial)

Smith Barney

Mailing Address 227 W Monroe

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.77

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 9

Transaction ID: SA17.10647385

Amount of Each Receipt this Period

5.32

Interest Earned

**B.**

Full Name (Last, First, Middle Initial)

Smith Barney

Mailing Address 227 W Monroe

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.62

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 9

Transaction ID: SA17.10647386

Amount of Each Receipt this Period

5.85

Interest Earned

**C.**

Full Name (Last, First, Middle Initial)

Smith Barney

Mailing Address 227 W Monroe

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.41

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA17.10647387

Amount of Each Receipt this Period

6.79

Interest Earned

**SUBTOTAL** of Receipts This Page (optional) .....

17.96

**TOTAL** This Period (last page this line number only) .....

25.79



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CityPAC

<b>A.</b> Full Name (Last, First, Middle Initial) AuthNet Mailing Address 808 East Utah Valley Drive	<b>Transaction ID:</b> SB21B.122813 <b>Date of Disbursement</b> <div> <div>09</div> <div>02</div> <div>2009</div> </div>
City American Fork State UT Zip Code 84003 Purpose of Disbursement Auth.net credit card processing fee Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>211.75</div>
<b>B.</b> Full Name (Last, First, Middle Initial) AuthNet Mailing Address 808 East Utah Valley Drive City American Fork State UT Zip Code 84003 Purpose of Disbursement Auth.net credit card processing gateway Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.122817 <b>Date of Disbursement</b> <div> <div>10</div> <div>02</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>10.15</div>
<b>C.</b> Full Name (Last, First, Middle Initial) AuthNet Mailing Address 808 East Utah Valley Drive City American Fork State UT Zip Code 84003 Purpose of Disbursement Auth.net credit card processing fee Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.122818 <b>Date of Disbursement</b> <div> <div>10</div> <div>02</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>47.73</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**269.63**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CityPAC

<b>A.</b> Full Name (Last, First, Middle Initial) AuthNet Mailing Address 808 East Utah Valley Drive	<b>Transaction ID:</b> SB21B.122819 <b>Date of Disbursement</b> <div> <div>11</div> <div>03</div> <div>2009</div> </div>
City American Fork State UT Zip Code 84003 Purpose of Disbursement Auth.net credit card processing gateway Candidate Name <div> <div>Office Sought:</div> <div> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </div> <div>           Disbursement For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div> <div>         State: District:       </div>	<b>Amount of Each Disbursement this Period</b> <div>10.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) AuthNet Mailing Address 808 East Utah Valley Drive	<b>Transaction ID:</b> SB21B.122820 <b>Date of Disbursement</b> <div> <div>11</div> <div>03</div> <div>2009</div> </div>
City American Fork State UT Zip Code 84003 Purpose of Disbursement Auth.net credit card processing fee Candidate Name <div> <div>Office Sought:</div> <div> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </div> <div>           Disbursement For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div> <div>         State: District:       </div>	<b>Amount of Each Disbursement this Period</b> <div>10.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) AuthNet Mailing Address 808 East Utah Valley Drive	<b>Transaction ID:</b> SB21B.122824 <b>Date of Disbursement</b> <div> <div>12</div> <div>02</div> <div>2009</div> </div>
City American Fork State UT Zip Code 84003 Purpose of Disbursement Auth.net credit card processing gateway Candidate Name <div> <div>Office Sought:</div> <div> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </div> <div>           Disbursement For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div> <div>         State: District:       </div>	<b>Amount of Each Disbursement this Period</b> <div>10.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**30.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CityPAC

<b>A.</b> Full Name (Last, First, Middle Initial) AuthNet Mailing Address 808 East Utah Valley Drive	<b>Transaction ID:</b> SB21B.122825 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 2 / 2 0 0 9</div> </div>
City American Fork State UT Zip Code 84003 Purpose of Disbursement Auth.net credit card processing fee Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>10.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Chicago Festival of Israeli Cinema Mailing Address PO Box 118512 City Chicago State IL Zip Code 60611 Purpose of Disbursement CoSponsor Film Festival Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.122826 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 0 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>800.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Sage Systems LLC Mailing Address PO Box 2201 City Peabody State MA Zip Code 01960 Purpose of Disbursement Member DB fee Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.122802 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 9 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>750.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1560.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
CityPAC

**A.**

Full Name (Last, First, Middle Initial)  
Sage Systems LLC

Mailing Address PO Box 2201

City Peabody State MA Zip Code 01960

Purpose of Disbursement  
Member DB fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.122827

Date of Disbursement

/   /

Amount of Each Disbursement this Period

750.00

**B.**

Full Name (Last, First, Middle Initial)  
Ben Torchman

Mailing Address

City State Zip Code

Purpose of Disbursement  
Support for CityPAC 25th Ann Event

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.122808

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2745.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3495.00

**TOTAL** This Period (last page this line number only) .....

5354.63

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 25

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
CityPAC

**A.**

Full Name (Last, First, Middle Initial)  
Bennett Election Committee

Mailing Address 175 South West Temple Suite 650

City State Zip Code  
Salt Lake City UT 84101

Purpose of Disbursement  
Contribution

Candidate Name  
Robert F Bennett

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: UT District: 00

**Transaction ID:** SB23.122804

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)  
Citizens for Arlen Specter

Mailing Address 236 Massachusetts Ave NE

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Contribution

Candidate Name  
Arlen Specter

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 00

**Transaction ID:** SB23.122811

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)  
Feingold Senate Committee

Mailing Address PO BOX 620062

City State Zip Code  
Middleton WI 53562

Purpose of Disbursement  
Contribution

Candidate Name  
Russell D Feingold

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 00

**Transaction ID:** SB23.122822

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**4000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 25

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
CityPAC

A.

Full Name (Last, First, Middle Initial)  
Friends of Barbara Boxer

Mailing Address PO BOX 411176

City Los Angeles State CA Zip Code 90041

Purpose of Disbursement  
Contribution

Candidate Name  
Barbara Boxer

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 00

Transaction ID: SB23.122821

Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)  
Melissa Bean for Congress

Mailing Address PO Box 3068

City Barrington State IL Zip Code 60010

Purpose of Disbursement  
Contribution

Candidate Name  
Melissa Luburich Bean

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 08

Transaction ID: SB23.122814

Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)  
People for Patty Murray

Mailing Address PO Box 3662

City Seattle State WA Zip Code 98124

Purpose of Disbursement  
Contribution

Candidate Name  
Patricia L Murray

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 00

Transaction ID: SB23.122788

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**4000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
CityPAC

**A.**

Full Name (Last, First, Middle Initial)  
Schakowsky for Congress

Mailing Address PO Box 5130

City Evanston State IL Zip Code 60204

Purpose of Disbursement  
Contribution

Candidate Name  
Janice D Schakowsky

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 09

**Transaction ID:** SB23.122810

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)  
Schock for Congress

Mailing Address PO Box 10555

City Peoria State IL Zip Code 61612

Purpose of Disbursement  
Contribution

Candidate Name  
Aaron Jon Schock

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 18

**Transaction ID:** SB23.122815

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)  
VISCLOSKY FOR CONGRESS COMMITTEE

Mailing Address P O BOX 10003

City Merrillville State IN Zip Code 46411

Purpose of Disbursement  
Contribution

Candidate Name  
Peter J Visclosky

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 01

**Transaction ID:** SB23.122823

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**4000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CityPAC

A.

Full Name (Last, First, Middle Initial)  
Volunteers for Shimkus

Mailing Address PO Box 5458

City Springfield State IL Zip Code 62705

Purpose of Disbursement  
Contribution

Candidate Name  
John M Shimkus

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 19

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.122816

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

14000.00



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
CityPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Deja Views	<b>Transaction ID:</b> SB29.122809 <b>Date of Disbursement</b>
Mailing Address	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 5 / 2 0 0 9</div> </div>
City Chicago State IL Zip Code	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Photography - CityPAC 25th Ann Event	<div> <div></div> <div>300.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Fultons on the River	<b>Transaction ID:</b> SB29.122801 <b>Date of Disbursement</b>
Mailing Address 315 N LaSalle	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 0 9</div> </div>
City Chicago State IL Zip Code 60654	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CityPAC 25th Anniversary Event	<div> <div></div> <div>1000.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Fultons on the River	<b>Transaction ID:</b> SB29.122807 <b>Date of Disbursement</b>
Mailing Address 315 N LaSalle	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 9 / 2 0 0 9</div> </div>
City Chicago State IL Zip Code 60654	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CityPAC 25th Anniversary Event	<div> <div></div> <div>7715.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**9015.00**

**TOTAL** This Period (last page this line number only) .....

**9015.00**